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I hereby certify that this correspondence is being filed electronically with the U.S. Patent and Trademark Office on the below date:
Date: May 25, 2007 Name: Timothy J. Le Duc, Reg. No. 54,745 Signature: /Timothy J. Le Duc/

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**IN THE UNITED
STATES PATENT AND TRADEMARK OFFICE**In re Appln. of: Jacob A. Flagle, et al.Appln. No.: 10/736,047Filed: December 15, 2003For: GUIDEWIRE WITH FLEXIBLE TIPAttorney Docket No: 8627/44 (PA-5464-RFB)Examiner: Jonathan ML ForemanArt Unit: 3736

Mail Stop AF
Commissioner for Patents
P. O. Box 1450
Alexandria, VA 22313-1450

TRANSMITTAL

Sir:

Attached is/are:

- ☒ Transmittal Letter (in dup.); Amendment and Response After Final
☐ Return Receipt Postcard

Fee calculation:

- ☒ No additional fee is required.
☐ Small Entity.
☐ An extension fee in an amount of \$_____ for a _____-month extension of time under 37 C.F.R. § 1.136(a).
☐ A petition or processing fee in an amount of \$_____ under 37 C.F.R. § 1.17(____).
☐ An additional filing fee has been calculated as shown below:

					Small Entity			Not a Small Entity	
	Claims Remaining After Amendment		Highest No. Previously Paid For	Present Extra	Rate	Add'l Fee	or	Rate	Add'l Fee
Total		Minus			x \$25=			x \$50=	
Indep.		Minus			x 100=			x \$200=	
First Presentation of Multiple Dep. Claim					+\$180=			+\$360=	
					Total	\$		Total	\$

Fee payment:

- ☐ A check in the amount of \$_____ is enclosed.
☐ Please charge Deposit Account No. 23-1925 in the amount of \$_____. A copy of this Transmittal is enclosed for this purpose.
☐ Payment by credit card in the amount of \$_____ (Form PTO-2038 is attached).
☒ The Director is hereby authorized to charge payment of any additional filing fees required under 37 CFR § 1.16 and any patent application processing fees under 37 CFR § 1.17 associated with this paper (including any extension fee required to ensure that this paper is timely filed), or to credit any overpayment, to Deposit Account No. 23-1925.

Respectfully submitted,

May 25, 2007
Date

/Timothy J. Le Duc/
Timothy J. Le Duc (Reg. No. 54,745)

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